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Fourth Quarterly Report for FY 2008  
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HealthPRO  
QUARTERLY REPORT

April 1 – June 30, 2008

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## TABLE OF CONTENTS

LIST OF ABBREVIATIONS.....	3
EXECUTIVE SUMMARY .....	4
MAJOR ACCOMPLISHMENTS & PROJECT STATUS .....	6
A. CONDUCT OF STRATEGIC COMMUNICATION WORKSHOPS.....	6
B. DEVELOPING OF THE PROVINCIAL BEHAVIORAL PROFILES ON HEALTH.....	9
C. ENGAGEMENTS WITH THE DOH-NATIONAL CENTER FOR HEALTH PROMOTION .....	9
D. ENGAGEMENTS WITH THE USAID CAS . .....	110
E. PRINT MEDIA MONITORING. ....	12
F. RESEARCH, MONITORING & EVALUATION.....	12
G. KEY PERSONNEL RECRUITMENT . ....	112
H. PROJECT MANAGEMENT . ....	13
NEXT QUARTER HIGHLIGHTS .....	13

## LIST OF ABBREVIATIONS

A2Z	A to Z Project (The USAID Micronutrient and Child Blindness Project)
BCC	Behavior Change Communication
CA	Cooperating Agency
CHD	Centers for Health Development
CPR	Contraceptive Prevalence Rate
CTO	Cognizant Technical Officer
DCOP	Deputy Chief of Party
DOH	Department of Health
DOTS	Directly Observed Therapy Short-Course
FC	Field Coordinator
FP	Family Planning
HEALTHGOV	USAID Project on Strengthening of Health Systems
HEPO	Health Education and Promotions Officer
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
HPC	Health Promotion and Communication
HPDP	Health Policy Development Project
IPC/C	Interpersonal Communication and Counseling
IR	Intermediate Results
LCE	Local Chief Executive
LGU	Local Government Unit
LOP	Life-Of-Project
M&E	Monitoring and Evaluation
MNCHN	Maternal, Newborn and Child Health and Nutrition
NCHP	National Center For Health Promotion
NGO	Nongovernmental Organization
PHO	Provincial Health Office/Officer
PIO	Provincial Information Officer
PIPH	Provincial Investment Plan for Health
PMP	Performance Management Plan
PMEP	Performance Monitoring and Evaluation Plan
PRISM Private	Sector Mobilization for FP and MCH
RTI	Research Triangle Institute
SO	Strategic Objective
SHIELD	Sustainable Health Improvement through Empowerment and Local Development
STTA	Short-Term Technical Assistance
TA	Technical Assistance
TB	Tuberculosis
TB-DOTS	Tuberculosis-Directly Observed Therapy Short-Course
TB Linc	Linking Initiatives and Networking to Control TB
TWG	Technical Working Group
URC	University Research Corporation

## **EXECUTIVE SUMMARY**

The fourth quarter, covering the period 1 April through 30 June, 2008, saw a surge in major HealthPRO activities and accomplishments.

First, HealthPRO developed and conducted a four-module, highly interactive strategic communication planning (SCP) workshop to build the capabilities of local government units in planning and implementing sustainable health promotion and communication activities in their respective communities. The SCP workshop took participants through four (4) easy-to-use and easy-to-understand planning worksheets such as: 1) Analyzing the national, provincial and local health situations and reviewing provincial/city profiles and health targets, 2) Identifying local actors and setting priorities, 3) Setting local health promotion objectives, messages, channels and strategies, and 4) Identifying local indicators, activities, timelines and resources.

The first Strategic Communication Planning (SCP) workshop was held in the province of Capiz (Visayas) last April 28-30, 2008. Subsequently, SCP workshops were conducted in the provinces of Negros Occidental (Visayas, May 12-14, 2008), Zamboanga del Sur (Mindanao, May 14-16, 2008), Bulacan (Luzon, May 21-23, 2008), and Compostela Valley (Mindanao, June 24-26, 2008). Two-day SCP workshops on HIV/AIDS were also conducted in HIV/AIDS sites in the cities of Davao last May 8-9, 2008 and Zamboanga last June 10-12, 2008.

Second, HealthPRO, using results gleaned from the participatory action research (PAR) conducted in provinces of Bulacan, Negros Occidental and Zamboanga del Sur, developed provincial health behavioral profiles of clients in regard to their knowledge, attitudes and practices on MNCHN, TB, FP, HIV/AIDS and AI. These provincial health behavioral profiles were used as one of the tools in the SCP workshops to aid the LGUs in crafting evidence-based health promotion and communication strategies and activities. There were recommendations, however, to synthesize these three provincial behavioral profiles into one PAR profile of client's knowledge, attitudes and practices on MNCHN, TB, FP, and HIV/AIDS. Thus, a full PAR profile would be developed and should be ready for use in the SCP workshops in early August 2008.

Third, HealthPRO actively participated in the DOH-National Center for Health Promotion's annual zonal conferences of Health Education and Promotion Officers (HEPOs) held in Baguio City (Luzon), Cebu City (Visayas) and Davao City (Mindanao) where the HealthPRO's Chief of Party, Dr. Napoleon K. Juanillo, Jr. did presentations on Behavior Change Communication. HealthPRO and the NCHP had continued to engage in regular dialogue on areas of collaboration on health promotion and communication at the national level, particularly in the observance of health events such as the World TB Day and AIDS Candlelight Memorial.

Fourth, HealthPRO provided technical assistance to other USAID CAs. In collaboration with HealthGov, it conducted a three-day training of trainers on Basic HIV and AIDS Interpersonal Communication and Counselling. It provided substantive directions and inputs to TBLinc's BCC strategy which was later presented at an inter-CA meeting with USAID in late May, 2008. It helped HealthGov in developing a set of HPC guide questions per health theme to enrich the provincial profiles that HealthGov was producing. HealthPRO proposed the same set of HPC guide questions to the Service Delivery-TWG as additional tools in the gaps analysis matrix of the improved version of the Service Delivery Implementation Review (SDIR). It continued to take a lead role in the BCC-TWG and on matters of health promotion and communication in the other thematic TWGs (i.e., TB, HIV/AIDS, CSR, SD and M&E).

Fifth, HealthPRO collaborated with HealthGov, TBLinc and other CAs in providing assistance to LGUs in the observance of key health events. Last May 18-19, 2008, together with HealthGov, it provided technical assistance to city health offices in Quezon City, Angeles, Cebu, Iloilo, Davao, Zamboanga and General Santos to commemorate the AIDS Candlelight Memorial. Likewise, HealthPRO worked with TBLinc and HealthGov in providing technical assistance to the provinces of Bohol, Bulacan, Pampanga, and Sarangani in coordinating health promotion initiatives in the observance of World TB Day. TB fact sheets were designed, produced and distributed to various local media and key staff of provincial and municipal health offices. HealthPRO coordinated the media coverage in Bohol and Pampanga World TB Day activities, and provided the photo and video documentation of the events. In Sarangani, it helped produce the radio and television public service announcements and jingle on TB prevention and control featuring a audio-video message from Filipino World Boxing champion, Manny Pacquiao.

Sixth, HealthPRO continued to conduct program management activities including a) daily electronic monitoring and archiving of newspaper health articles from national dailies, b) updating of M&E documents like the PMEP, indicator list/matrix and indicator definitions and M&E plan, and c) personnel recruitment, with Ms. Lyn Rhona Montebon joining the project last May 5, 2008 for the position of RME Advisor. The aggressive search for BCC and Mass Media Advisers would continue in July 2008 in consultation with USAID and URC headquarters.

Overall, it can be concluded that the project's accomplishments in the fourth quarter would enable it to achieve much of what it had set for Year One. The fourth quarter produced considerable number of expected outputs that have significant implications for the project's continuing progress in the next quarter and as it sets out for Year Two.

## **MAJOR ACCOMPLISHMENTS AND PROJECT STATUS**

HealthPRO is a USAID Philippines project to support behavior change communications (BCC) activities in the country. HealthPRO aims to assist local government units (LGUs) and the Autonomous Region for Muslim Mindanao (ARMM) improve, expand, and strengthen the quality and sustainability of health promotion and communication efforts. Three sub-results will support the achievement of the overall objective namely, (1) increase the reach and impact of BCC interventions in local communities, (2) enable LGUs, ARMM and the Department of Health-National Center for Health Promotion (DOH-NCH) to design, implement and sustain BCC activities, and (3) assist USAID's health partners and allied organizations in maximizing the effectiveness of their health promotion and communication initiatives. The project focuses on following health areas: Maternal, Newborn and Child Health and Nutrition (MNCHN), Family Planning (FP), Tuberculosis (TB), HIV-AIDS as well as other infectious diseases like Avian Influenza (AI).

The expected outcomes of the HealthPRO Project are: a) substantial and demonstrated changes in health behaviors among individuals and families, especially those behaviors focusing on disease prevention and reducing risks of morbidity and mortality; b) increased early treatment of infectious diseases among newborn and children; c) increased local capacity of local and national institutions to effectively carry out health promotion and communication activities; and d) improved coordination of health promotion and communication among USAID, other funded projects, government, and non-government institutions.

Specifically, HealthPRO collaborates with USG-assisted LGUs and ARMM by providing an integrated package of technical assistance on a) interpersonal communication, b) group and community communication, c) use of mass media for raising awareness on health and generating advocacy, and d) traditional media and new information and communication technologies for behavior change communication.

During the fourth quarter, covering the period April 1st through June 30<sup>th</sup> of 2008, HealthPRO initiated activities consistent with its program under the Year 1 Workplan. The following activities and interventions were implemented to mobilize and capacitate local government units (LGUs) in promoting healthy practices among various target groups.

### **A. Conduct of Strategic Communication Planning Workshops.**

In consultation with the inter-CA technical working group on Behavior Change Communication (BCC-TWG), HealthPRO had developed and conducted a four-module, highly interactive strategic communication planning workshop to build the capabilities of local government units in crafting and implementing sustainable health promotion and communication activities in their respective communities. The three-day Strategic Communication Planning (SCP) workshop had two interlocking goals: first, to develop

among LGUs a keen appreciation for the systematic and programmatic process of evidence-based communication planning; and second, to equip LGUs with the skills to identify specific, appropriate and sustainable health promotion and communication activities that can change the way individuals, families and other key actors in the communities think, feel and behave on Maternal, Newborn, & Child Health and Nutrition (MNCHN), family planning (FP), tuberculosis (TB), HIV/AIDS, and other infectious diseases like Avian Influenza (AI).

Specifically, the SCP workshop aimed to enable the LGUs to: (1) analyze a set of health problems salient to the province by gathering, organizing, and assessing relevant factors such as the nature and extent of the problem, potential audiences and their characteristics, available resources, and the communication environment; (2) craft the LGU's vision for each of the health programs that are relevant to the province; (3) develop a set of HPC objectives in relation to each of the health programs of the province; (4) identify and segment audiences for each of the HPC objectives; (5) determine strategies and approaches relating to message development, channel selection, materials development, and source development in relation to each of the HPC objectives; (6) identify resources in relation to each of the HPC objectives; (7) set a realistic timeline for the HPC activities in relation to each of the health promotion and communication objectives; and (8) draft a monitoring and evaluation framework in relation to the goal and objectives for each of the health programs identified by the province.

In order to achieve these objectives, the SCP took participants through four (4) easy-to-use and easy-to-understand planning worksheets such as: 1) Analyzing the local health situation and reviewing provincial/city profiles and health targets, 2) Identifying local actors and setting priorities, 3) Setting local health promotion objectives, messages, channels and strategies, and 4) Identifying local indicators, activities, timelines and resources (*see Annex I for the SCP Worksheets for each of the health programs*). Since it was necessary to capture issues and concerns on health promotion and communication that were specific to the province and the local communities, the SCP required broad representation. Hence participants, totalling about 50-60, came from key LGU offices such as a) provincial health office led by the provincial health officer and the PHO technical team, b) office of the provincial governor (i.e., provincial information officer, budget officer, planning officer, provincial health board, health committee, c) Department of Health representatives, d) inter-local health zones representatives, e) municipal office (i.e., municipal health officer, nurses/midwives, and barangay health workers), and f) office of the municipal mayor (i.e., municipal information officer). Working in teams, participants reviewed all available evidence such as the provincial investment plans for health (PIPH), service delivery implementation review (SDIR), FHSIS, annual health reports, and provincial health data and critically analyzed what the data implied for crafting local health promotion and communication initiatives.

A total of one hundred eighty three (183) key officers and staff from the provincial health office, municipal health office as well as information officers, midwives, nurses, barangay health workers from local communities had participated in the provincial SCP workshops.

The first Strategic Communication Planning (SCP) workshop was held in the province of Capiz (Visayas) last April 28-30, 2008. Subsequently, SCP workshops were conducted in the provinces of Negros Occidental (Visayas, May 12-14, 2008), Zamboanga del Sur (Mindanao, May 14-16, 2008), Bulacan (Luzon, May 21-23, 2008), and Compostela Valley (Mindanao, June 24-26, 2008).

Two-day SCP workshops on HIV/AIDS were also conducted in HIV/AIDS sites in the cities of Davao last May 8-9, 2008 and Zamboanga last June 10-12, 2008, with a combined total of forty two (42) participants (*see Annexes 2a through 2e for the completed provincial strategic communication plans and Annexes 3a & 3b for the strategic communication plans for HIV/AIDS*).

At the end of each SCP workshop, the provincial health officer organized a **health promotion and communication mentoring team** which would provide a constructive and supportive environment to the provincial health office and municipal health offices in implementing health promotion and communication initiatives on FP, MNCHN, TB, and HIV/AIDS (*see Annex 4 for the roles and responsibilities of the HPC mentoring team*).

Participants had very positive impressions of the SCP workshops. These were expressed at the closing ceremonies of the workshops as well as in the written evaluations of the individual modules and the workshop as a whole which showed very high ratings for the content and process of the SCP workshop. Participants fully appreciated both the lessons and skills gained and the concrete workshop outputs (i.e., written and charted BCC strategies for Maternal, Newborn, & Child Health and Nutrition (MNCHN), family planning (FP), tuberculosis (TB), HIV/AIDS, and Avian Influenza (AI). In particular, the participants said that the workshop was implemented quite smoothly and achieved the expected outputs per module. They liked the fun aspect of the workshop (e.g. role-playing for plenary presentation, the Picture Board Crafting/Dioramas, the energizers) as differentiated from the traditional straight-reporting style in similar workshops. The participants also appreciated the presence/involvement of CAs to assist in the group discussion as well as the participation of other stakeholders in the province and the region.

However, they also cited some areas for improvement such as: a) Improving the time allotment for the group discussions especially for the modules on identifying strategies, messages, channels, and resources. The one hour allotted was hardly sufficient considering the no of target actors; and b) Increasing discussions and technical inputs on communication.

The HealthPRO team, the USAID CTO and other CAs also made comments and observations such as: a) Need for increased participation from municipalities and barangays such as ike Barangay Health Workers or BHWs; b) Need to define the roles for PHO, Head of Technical, Health Sector Committee Representative, Provincial Information Officer, Provincial Planning and Development Office, other local government participants; c) Need to define the role of the CA representatives including their role in the preparatory/planning phase and during the conduct of the workshop itself; d) Need for the project staff to be knowledgeable of the health

profile, facts and figures and other critical information on the province with respect to the programs that USAID is supporting. Indeed, some discussion/analysis should be done before the strategic communication planning itself. If possible, a list of critical questions to ask as a result of the pre-SCP analysis should be prepared for participants to answer and/or think about during the planning activity; and e) Need to link the indicators and targets in the PIPH to the indicators and targets in the communication plan.

Certainly HealthPRO benefited considerably from these constructive evaluations and comments of the SCP participants, USAID CTO, and members of the BCC-TWG with regard to the various aspects of the workshop such as content, process, worksheets, instructional and reference materials, preparatory activities, facilitation and workshop techniques, schedules and venue. In a special workshop held last May 29-30, 2008, the HealthPRO team consolidated the comments, recommendations and suggestions and sharpened the content, worksheets, materials and process. The succeeding workshops scheduled between July and September, 2008 for the provinces of Albay (Luzon), Sarangani (Mindanao), Negros Oriental (Visayas), Pangasinan (Luzon), South Cotabato (Mindanao), and Bukidnon (Mindanao) and in the HIV/AIDS sites in the cities of Angeles, Pasay, Quezon City, and General Santos would follow the revised SCP worksheets and guidelines (*see Annex 5 for the action steps and workshop planning guide*).

#### **B. Development of the provincial behavioral profiles on health.**

HealthPRO developed provincial health behavioral profiles of clients in regard to their knowledge, attitudes and practices on MNCHN, TB, FP, HIV/AIDS and AI from the provinces of Bulacan, Negros Occidental and Zamboanga del Sur (*see Annexes 6a through 6c*). The provincial health behavioral profiles combined existing provincial health data with the results of the participatory action research (PAR) which HealthPRO conducted in these three provinces last January-March 2008. HealthPRO used these provincial health behavioral profiles as one of the tools in the SCP workshops to aid the LGUs in developing evidence-based health promotion and communication strategies and activities. There were recommendations, however, to synthesize these three provincial behavioral profiles into one PAR profile of client's knowledge, attitudes and practices on MNCHN, TB, FP, and HIV/AIDS. Thus, a full PAR profile would be developed and should be ready for use in the SCP workshops in early August 2008.

#### **C. Engagements with the DOH-National Center for Health Promotion.**

HealthPRO actively participated in the DOH-National Center for Health Promotion's annual zonal conferences of Health Education and Promotion Officers (HEPOs) held in Baguio City (Luzon), Cebu City (Visayas) and Davao City (Mindanao). HealthPRO's Chief of Party, Dr. Napoleon K. Juanillo, Jr. was the resource speaker on behavior change communication (BCC) and made presentations on BCC in the Luzon and Visayas conferences. In the same conference, the DOH-NCHP presented its Health Promotion for Behavior Change Framework, which was crafted with substantive technical assistance from HealthPRO.

NCHP also adopted HealthPRO's Participatory Action Research instrument for HEPOs in its conduct of a capacity mapping among HEPOs.

HealthPRO and the NCHP continued to engage in regular dialogue on areas of collaboration on health promotion and communication at the national level, particularly in the observance of health events such as the World TB Day and AIDS Candlelight Memorial. NCHP also participated as presenters and facilitators in the SCP workshops in Negros Occidental, Zamboanga del Sur and Bulacan.

#### **D. Engagements with the USAID CAs**

Providing technical Assistance on Interpersonal Communication. HealthPRO, in collaboration with HealthGov, conducted a 3-day training of trainers on Basic HIV and AIDS Interpersonal Communication and Counselling last April 22-24, 2008, at the Crown Regency Hotel, Makati City. It was attended by officers and staff from the Health and Promotion Education Office (HEPO), Police Department and Social Hygiene Clinic (SHC) of selected City/Municipal Health Offices (CHOs/MHOs) as well as representatives of non-government organizations and local AIDS councils. The workshop aimed to train the participants become effective trainers on Interpersonal HIV and AIDS Communication and Counselling and assist Local Government Units (LGUs) in improving, expanding, and strengthening the quality and sustainability of health promotion and communication for HIV and AIDS in the LGUs. The training took participants through an overview and discussion of the following topics: a) Global HIV Epidemic, b) National HIV and AIDS situation and local responses in the Philippines, c) AIDS 101 (i.e., Basic STI, HIV and AIDS Education), d) HIV Risk Factors and Other Structural Factors that Influence Risk Behaviors of the Most-At-Risk Populations (MARPs), and e) Interpersonal Communication and Counselling.

At the end of the three-day training, the participants developed Action Plans that specified immediate activities to be implemented through local government units in the next eight (8) months such as: a) providing feedback to LGUs on the IPC/C Training of trainers, b) coordinating advocacy meetings with Local Chief Executives and Local AIDS Councils, c) rolling-out the IPC/C Training of Trainers (i.e., identification and training of peer educators), d) designing and producing IEC materials, e) site monitoring , and f) conduct of evaluation and quarterly meetings. The Action Plans also designated point persons and/or organizations that would be responsible for each of the activities.

Participating in Health Events. HealthPRO collaborated with HealthGov in providing assistance to city health offices in Quezon City, Angeles, Cebu, Iloilo, Davao, Zamboanga and General Santos to commemorate the AIDS Candlelight Memorial last May 18, 2008. The AIDS Candlelight Memorial, the world's largest and oldest annual grassroots HIV/AIDS event and an ideal way to begin talking about HIV/AIDS in the community, drew hundreds of participants in Quezon City, General Santos and Zamboanga City led by their respective city officials such as the Vice-Mayor Herbert M. Bautista (Quezon City), Mayor Pedro B. Acharon, Jr. (General Santos City), and Mayor Celso Lobregat (Zamboanga City).

On TB communications, HealthPRO worked with TBLinc and HealthGov in providing technical assistance to the provinces of Bohol, Bulacan, Pampanga, and Sarangani in coordinating health promotion initiatives in the observance of World TB Day. This year's World TB Day was about celebrating the lives and stories of people affected by TB: women, men and children who have taken TB treatment; nurses; doctors; researchers; community workers--anyone who has contributed towards the global fight against TB. HealthPRO designed and produced the TB fact sheets which were later distributed to various local media and key staff of provincial and municipal health offices, coordinated the media coverage in Bohol and Pampanga, and provided the photo and video documentation of the events. In Sarangani, HealthPRO helped produce the radio and television public service announcements and jingle on TB prevention and control featuring an audio-video message from Filipino World Boxing champion, Manny Pacquiao. HealthPRO's TB Specialist, Dr. Jeanne Valderrama served as the main resource person in an open forum for municipal health officers, nurses, midwives, and barangay health workers.

Providing Technical Assistance to CAs. HealthPRO provided substantive directions and inputs to TBLinc's BCC strategy which was later presented at an inter-CA meeting with USAID in late May, 2008. It helped HealthGov in developing a set of HPC guide questions per health theme to enrich the provincial profiles that HealGov was producing. HealthPRO proposed the same set of HPC guide questions to the TWG-Service Delivery as additional tools in the gaps analysis matrix of the improved version of the Service Delivery Implementation Review (SDIR).

HealthPRO chaired the regular monthly meetings of the BCC-TWG where it held continuing dialogue with other CAs on how to work as a unified communication team under the USAID S03 and discuss ways of optimizing resources to effectively deliver technical assistance on health promotion and communication in the LGUs. It continued to take a lead role on matters of health promotion and communication in the various TWGs (i.e., TB, HIV/AIDS, CSR, SD and M&E).

#### **E. Print Media Monitoring.**

HealthPRO continued to conduct daily electronic monitoring and archiving of newspaper articles in national dailies pertinent to tuberculosis, maternal and child health, family planning, HIV/AIDs, Avian Flu, vitamin A and zinc supplementation. Electronic summaries with hyperlinks were sent to the Office of Health-USAID and CAs.

#### **F. Research, Monitoring and Evaluation**

HealthPRO had set up the physical filing system for various M&E documents. It had updated the PMEP, indicator list/matrix and indicator definitions and M&E plan.

#### **G. Key personnel recruitment.**

HealthPRO conducted interviews for the BCC, Mass Media, and Research, Monitoring and Evaluation Advisor positions and was able to fill up the position for the RME Advisor. Ms. Lyn Rhona Montebon joined the project last May 5, 2008. Although the position of Mass Media Advisor was officially offered to Ms. Grace Agoncillo, she had to eventually give up the offer due to health reasons. Immediately, another candidate, Ms. Diane Mendoza was offered the post but she also later declined due to new personal and professional developments.

The aggressive search for BCC Adviser would continue this quarter in consultation with USAID and URC headquarters. The HealthPRO staff including its consultants collaborated in ensuring that tasks under this position were provided the needed attention.

The search for provincial coordinators was advertised in major Philippine newspapers and produced quite a number of applicants. The applicants were screened for interviews and it was expected that the provincial coordinators (one each for Luzon, Visayas, ARMM and two for Mindanao) would be on board by August 2008. The area managers had also started the process of identifying their project assistants.

#### **H. Project Management.**

The URC headquarter (HQ) continued to provide technical support to all project activities during this quarter. URC Regional Representative, Mr. Isagani M. Perla was present during much of the fourth quarter to assist in the budget re-alignment and staff recruitment and worked closely with the Dr. Nap Juanillo, Jr. (COP), Dr. Mina Aquino (DCOP) and Marcelo Tenorio (Finance Director) in finalizing field operations, personnel, finance and administrative matters, including the final negotiations with lessors for the HealthPRO Regional offices in Cebu and Davao.

### **III. NEXT QUARTER HIGHLIGHTS**

During the period July through September 2008, HealthPRO will conduct a team workshop to plan out the major strategies and activities for Year Two covering the period October 1, 2008 through December 31, 2009, particularly as they relate to rolling out the specific interventions on interpersonal communication, group communication/community mobilization, mass media for health advocacy and use of traditional communication and emerging communication technologies to support behaviour change and to implementing the small grants programs.

It will conduct SCP closure meetings in the provinces of Capiz, Negros Occidental, Bulacan, Zamboanga del Sur, Compostela Valley in order to finalize the formation of the HPC Mentoring Team and implement the specific interventions they have identified in their SCPs requiring HealthPRO's technical assistance on interpersonal communication, group communication/community mobilization, mass media for health advocacy and use of

traditional communication and emerging communication technologies to support behaviour change on Maternal, Newborn and Child Health and Nutrition (MNCHN), Family Planning (FP), Tuberculosis (TB), HIV-AIDS as well as other infectious diseases like Avian Influenza (AI). It is anticipated that the next quarter will focus on sharpening the technical assistance that can address the specific health promotion and communication needs and concerns of these provinces.

HealthPRO will hold the Strategic Communication Workshops in the provinces of Albay, Sarangani, Negros Oriental, Pangasinan and South Cotabato and the SCP on HIV/AIDS in the cities of Angeles, Pasay and Quezon in Metro Manila. It will continue to listen to the feedback of participants and use these to sharpen the content and process of the workshops. It will try to refine the provincial behavioural profiles and produce a synthesized behavioural profile using the results of its participatory action research (PAR).

Moreover, it will hold consultative meetings with Dr. Tahir Sulaik and his team in the DOH-ARMM in regard to BCC programs and activities in ARMM. It will explore the possibility of conducting a regional SCP for ARMM and use the ARMM communication plan as the basis for providing technical assistance on interpersonal communication, group communication/community mobilization, mass media for health advocacy and use of traditional communication and emerging communication technologies to support behaviour change in ARMM.

It will continue to work with and provide technical assistance to the DOH-NCHP and USAID CAs, especially in the conduct of health events such as the World Population Day in July, Lung Month in August and Garantisadong Pambata in September. It will continue to collaborate very closely with the NCHP, particularly in the area of institutionalizing strategic communication planning in the Centers for Health Development in both USG-assisted and non-USG-assisted sites.

In regard to personnel recruitment, it is expected that the provincial coordinators for Luzon, Visayas and Mindanao will have been identified and that the area offices will be functional. Moreover, it is hoped that the project will have its Mass Media Advisor. Continuing search for the BCC Advisor position will be conducted.